#### IN THE DISTRICT COURT OF GUAM

ROBERT J. DEL ROSARIO,

**CIVIL CASE NO. 04-00028** 

Plaintiff,

vs.

**CLAIM OF GREGORY MILLER, D.C.** 

JAPAN AIRLINES INTERNATIONAL CO., LTD.,

Defendant.

I claim \$7,075.34 out of the settlement in this case. Attached are my liens and medical billings.

Gregory J. Miller, D.C.

Pro se

#### **DECLARATION OF SERVICE**

The undersigned hereby certifies that a true and correct copy of the foregoing will be hand delivered on March 27, 2008 to Howard Trapp, Michael Flynn and David Ledger.

Mean March 27 and David Ledger.

FILED
DESTRICT COURT OF GUAM

MAR 272008,

JEANNE G. QUINATA

Clerk of Court

STATEMENT

Date: 03/27/2008

Last Claim:

10/31/2003

Last Payment:

Last Charge: 03/07/2008

Robert J Del Rosario P.o. Box 7394 Tamuning, GU 96931

Patient: Del Rosario, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
10/10/2002	1	Expanded History/Exam	99202		60.00	60.00	.00	.00.
11/04/2002	1	CMT One to Two Regions	98940		32.00	32.00	.00	.00
11/05/2002	1	CMT One to Two Regions	98940		32.00	.00	.00	32.00
11/07/2002	1	CMT One to Two Regions	98940		32.00	32.00	.00	32.00
11/07/2002	1	bal			.00	32.00	.00	00
11/26/2002	1	CMT One to Two Regions	98940		32.00	<b>32.0</b> 0	.00	.00.
11/29/2002	1	CMT One to Two Regions	98940		32.00	32.00	.00	.00
11/30/2002	1	CMT One to Two Regions	98940		32.00	32.00	.00.	.00
04/17/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00.	40.00
04/18/2003	1	CMT 3 to 4 Regions	98941		40.00	.00.	.00	80.00
04/18/2003	1	Extremeties	98943		20.00	00	.00	100.00
04/18/2003	1	TP/G5	97124-52	2	22,00	.00	.00.	122.00
04/19/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	162.00
04/19/2003	1	TP/G5	97124-5	2	22.00	.00	.00	184.00
04/22/2003	1	Extremeties	98943		20.00	.00	.00	204.00
04/22/2003	1	CMT 3 to 4 Regions	98941		40,00	.00.	.00	244.00
04/22/2003	1	TP/G5	97124-5	2	22.00	.00	.00.	266.00
04/24/2003	1	Extremeties	98943		20.00	.00	.ÓO.	286.00
04/24/2003	1	CMT 3 to 4 Regions	98941		40.00	00	.00.	326.00
04/24/2003	1	TP/G5	97124-5	2	22.00	.00	.00	348.00
04/25/2003	1	Extremeties	98943		20.00	.00	.00.	368.00
04/25/2003	1	TP/G5	97124-5	2	22.00	.00	.00	390.00
04/25/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	430.00
05/20/2003	1	TP/G5	97124-5	2	22.00	.00	.00	452.00
05/20/2003	1	Extremeties	98943		20.00	.00	.00	472.00
05/20/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00.	512.00
05/22/2003	1	TP/G5	97124-5	2	22.00	.00	.00.	534.00
05/22/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	574.00
05/22/2003	1	Extremeties	98943		20.00	.00	.00.	594.00
05/23/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	634.00
05/23/2003	1	Extremeties	98943		20.00	.00	.00	654.00
05/23/2003	1	TP/G5	97124-5	2	22,00	.00.	.00.	676.00

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Date: 03/27/2008

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Last Charge:

03/07/2008

Robert J Del Rosario P.o. Box 7394 Tamuning, GU 96931

Patient: Del Rosario, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
05/24/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	716.00
05/24/2003	Ì	Extremeties	98943		20.00	.00	.00	736.00
05/24/2003	1	TP/G5	97124-5	2	22.00	.00	.00	758.00
05/27/2003	1	TP/G5	97124-5	2	22.00	.00	.00	780.00
05/27/2003	1	Extremeties	98943		20.00	.00	.00	800.00
05/27/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	840.00
05/30/2003	1	Extremeties	98943		20.00	.00	.00	860.00
05/30/2003	" <b>1</b>	TP/G5	97124-6	2	22.00	.00	.00	882.00
05/30/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	922.00
05/31/2003	1	INS CK 0013268			.00	150.00	.00	772,00
05/31/2003	1	CMT 3 to 4 Regions	98941		40.00	.00.	.00	812.00
05/31/2003	1	Extremeties	98943		20.00	.00	.00	832.00
05/31/2003	1	TP/G5	97124-5	2	22.00	.00	.00	854 00
07/11/2003	1	Ins Pd: 05-20-2003 > 05-3	1-200:		.00	.00	.ÖÖ.	854.00
07/11/2003	1	INS CK 13498			.00	100.00	.00	754.00
07/24/2003	1	X-ray Analysis	96499		30.00	.00	.00	784.00
07/24/2003	1	CMT 3 to 4 Regions	98941		40.00	.00.	.00.	824.00
07/25/2003	1	TP/G5	97124-5	2	22.00	.00	.00	846.00
07/25/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	886.00
07/26/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	926.00
07/26/2003	1	TP/G5	97124-5	52	22.00	.00	.00	948.00
07/31/2003	1	TP/G5	97124-5	52	22.00	.00	.00	970.00
07/31/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00.	1,010.00
08/01/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	1,050.00
08/01/2003	1	TP/G5	97124-5	52	22.00	.00	.00.	1,072.00
08/02/2003	1	TP/G5	97124-5	52	22.00	.00	.00	1,094.00
08/02/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	00	1,134.00
08/05/2003	1	CMT 3 to 4 Regions	98941		40.00	.00.	.00	1,174.00
08/05/2003	1	TP/G5	97124-5	52	22.00	.00	.00	1,196.00
08/07/2003	1	TP/G5	97124-5	52	22.00	.00	.00	1,218.00
08/07/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	1,258 00
08/09/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	,00	1,298.00

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Date: 03/27/2008

Last Claim:

10/31/2003

TO:6324368

Last Payment:

Last Charge:

03/07/2008

Robert J Del Rosario P.o. Box 7394 Tamuning, GU 96931

Patient Del Rosario, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
08/09/2003		TP/G5	97124-5	2	22.00	.00	.00	1,320.00
08/15/2003	1	TP/G5	97124-5	2	22.00	.00	.00.	1,342.00
08/15/2003	1	CMT 3 to 4 Regions	98941		40.00	.00	.00	1,382.00
09/15/2003	1	Copy of file	99070		25.00	.00	.00	1,407.00
09/18/2003	1	TP/G5	971 <b>24</b> -5	2	22.00	.00	.00	1,429.00
09/18/2003	1	CMT 3 to 4 Regions	98941		<b>44.00</b>	.00	.00	1,473.00
09/19/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	1,517.00
09/19/2003	1	TP/G5	97124-5	2	22.00	.00.	.00	1,539.00
09/20/2003	1	CMT 3 to 4 Regions	98941		<b>4</b> 4.00	.00	.00	1,583.00
09/20/2003	1	TP/G5	97124-5	2	22,00	.00	.00	1,605.00
09/22/2003	1	TP/G5	97124-5	2	22.00	.00	.00	1,627.00
09/22/2003	1	CMT 3 to 4 Regions	98941		44,00	.00	.00	1,671.00
09/23/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00.	1,715.00
09/23/2003	1	TP/G5	97124-5	2	22.00	.00	.ÓÒ.	1,737.00
09/25/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	1,781.00
09/25/2003	1	TP/G5	97124-5	2	22.00	.00	.00	1,803.00
09/26/2003	1	TP/G5	97124-5	2	<b>22,00</b>	.00	.00	1,825.00
09/26/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	1,869.00
09/29/2003	1	TP/G5	97124-5	2	22.00	.00	.00	1,891.00
09/29/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	1,935.00
09/30/2003	1	TP/G5	97124-5	2	22.00	.00	.00	1,957.00
09/30/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,001.00
10/02/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,045.00
10/02/2003	1	TP/G5	97124-5	2	22.00	.00	.00	2,087.00
10/02/2003	1	TP/G5	97124-5	2	22.00	.00	.00	2,089.00
10/02/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,133.00
10/03/2003	1	TP/G5	97124-5	i2	22.00	.00	.00	2,155.00
10/03/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,199.00
10/09/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,243.00
10/09/2003	1	TP/G5	97124-5	i2	22.00	.00	.00	2,265.00
10/14/2003	1	TP/G5	97124-5	52	22.00	.00	.00	2,287.00
10/14/2003		CMT 3 to 4 Regions	98941		44.00	.00	.00	2,331.00

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Gregory J. Miller, D.C. 2078 Ste C Rte 16 Dededo, GU 96929 (671) 637-7926 STATEMENT

Date: 03/27/2008

Last Claim:

10/31/2003

Last Payment:

Last Charge:

03/07/2008

Robert J Del Rosario P.o. Box 7394 Tamuning, GU 96931

Patient: Del Rosario, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
10/16/2003	1	TP/G5	97124-5	52	22.00	.00	.00	2,353.00
10/16/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,397.00
10/17/2003	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,441.00
10/17/2003	1	TP/G5	97124-5	52	22.00	.00	.00	2,463.00
10/17/2003	1	Detailed Hist/Exam	99214		75.00	.00	00	2,538 00
01/06/2004	1	TP/G5	97124-5	52	22.00	.00	.00.	2,560.00
01/06/2004	1	CMT 3 to 4 Regions	98941		44.00	.00.	.00	2,604.00
01/08/2004	1	TP/G5	97124-5	52	22.00	.00	.00	2,626.00
01/08/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,670.00
01/09/2004	1	TP/G5	97124-5	2	22.00	.00	.00	2,692.00
01/09/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,736 00
01/12/2004	1	Focused Consultation	99212		35.00	.00	00	2 771 00
01/12/2004	1	TP/G5	97124-5	52	22.00	.00	.00	2,793.00
01/12/2004	Ì	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,837.00
01/13/2004	1	TP/G5	9712 <b>4</b> -5	52	22.00	.00.	.00	2,859.00
01/13/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,903.00
01/15/2004	1	TP/G5	97124-5	52	22.00	.00	.00	2,925.00
01/15/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	2,969.00
01/16/2004	1	TP/G5	97124-5	52	22.00	.00	00	2,991.00
01/16/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00.	3,035.00
01/19/2004	1	TP/G5	97124-5	52	22.00	.00	.00	3,057 00
01/19/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,101.00
01/20/2004	1	TP/G5	97124-5	52	22.00	.00	.00	3,123.00
01/20/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,167.00
01/21/2004	1	TP/G5	97124-5	52	22.00	.00	.00	3,189.00
01/21/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,233.00
01/31/2004	1	TP/G5	97124-5	52	22.00	.00	.00	3,255.00
01/31/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,299.00
02/05/2004	1	TP/G5	97124-5	52	22.00	.00	.00	3,321.00
02/05/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,365.00
02/06/2004	1	TP/G5	97124-8	52	22.00	.00	.00	3,387.00
02/06/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,431.00

STATEMENT

Date: 03/27/2008

Last Claim.

10/31/2003

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03/07/2008

Robert J Del Rosario P.o. Box 7394 Tamuning, GU 96931

Patient Del Rosario, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
02/19/2004	1	TP/G5	97124-5	2	22.00	.00	.00	3,453.00
02/19/2004	1	ČMT 3 to 4 Regions	98941		44.00	.00	.00	3,497.00
02/20/2004	1	TP/G5	97124-5	2	22.00	.00	.00	3,519.00
02/20/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,563.00
02/24/2004	1	TP/G5	97124-52	2	22.00	.00	.00	3,585.00
02/24/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,629.00
02/27/2004	1	TP/G5	97124-5	2	22.00	.00	.00.	3,651.00
02/27/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,695.00
03/01/2004	1	TP/G5	97124-5	2	22.00	.00	.00	3,717.00
03/01/2004	4	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,761.00
03/05/2004	1	TP/G5	97124-5	2	22.00	.00	.00	3,783.00
03/05/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,827.00
03/12/2004	1	TP/G5	97124-5	2	22.00	.00	.00	3,849.00
03/12/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,893.00
06/29/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,937 00
07/02/2004	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	3,981.00
11/30/2004	1	interest	99070		42.99	.00	00	4,023.99
12/31/2004	1	interest	99070		43.46	.00	.00	4,067.45
01/31/2005	1	interest	99070		43.93	.00	.00	4,111.38
02/14/2005	1	Comprehensive Exam	99215		140.00	.00	.00	4,251.38
02/14/2005	1	TP/G5	9712452	:	22.00	.00	.00	4,273.38
02/14/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00.	4,317.38
02/24/2005	1	TP/G5	9712452	!	22.00	.00	.00	4,339.38
02/24/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	4,383.38
02/28/2005	1	interest	99070		48.77	.00	.00	4,432.15
03/01/2005	1	TP/G5	9712462	!	22.00	.00	.00	4,454.15
03/01/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	4,498.15
03/03/2005	1	TP/G5	9712452	!	22.00	.00	.00	4,520.15
03/03/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	00	4,564.15
03/11/2005	1	TP/G5	9712452	!	22.00	.00	.00	4,586.15
03/11/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	4,630.15
03/14/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	4,674.15

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Date: 03/27/2008

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Robert J Del Rosario P.o. Box 7394 Tamuning, GU 96931

Patient: Del Rosario, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
03/15/2005	1	TP/G5	9712452	!	22.00	.00	.00	4,696.15
03/15/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	4,740.15
03/28/2005	1	TP/G5	9712452	2	22.00	.00	.00	4,762.15
03/28/2005	1	CMT 3 to 4 Regions	98941		44.00	.00	.00	4,806.15
03/31/2005	1	interest	99070		51.9 <b>1</b>	.00	.00	4,858.06
04/30/2005	1	interest	99070		52.47	.00	.00	4,910.53
05/31/2005	1	interest	99070		53.03	.00	.00	4,963.56
06/30/2005	1	interest	99070		53.61	.00	.00	5,017.17
07/31/2005	1	interest	99070		54.19	00	.00	5,071.36
08/31/2005	1	Interest	99070		54.77	.00	.00	5,126.13
09/30/2005	1	Interest	99070		55.3 <b>6</b>	.00	.00	5,181.49
10/31/2005	1	Interest	99070		55,96	.00	.00	5,237.45
11/30/2005	1	Interest	99070		56.56	.00	.00	5,294.01
12/31/2005	1	Interest	99070		57.18	.0Ö	.00	5,351.19
01/31/2006	1	Interest	99070		57.80	.00	.00	5,408.99
02/28/2006	1	Interest	99070		58.42	.00	.00	5,467.41
03/31/2006	1	Interest	99070		59.05	.00	.00.	5,526.46
04/30/2006	1	Interest	99070		59.69	.00	.00	5,586.15
05/31/2006	1	Interest	99070		60.33	.00	.00	5,646.48
06/30/2006	1	Interest	99070		60.98	.00	.00	5,707.46
07/31/2006	1	Interest	99070		61.64	.00	.00	5,769.10
08/31/2006	1	Interest	99070		62.31	.00	.00	5,831.41
09/30/2006	1	Interest	99070		62.98	.00	.00	5 894 39
10/31/2006	1	Interest	99070		63.66	.00	.00	5,958.05
11/30/2006	1	Interest	99070		64.35	.00	.00	6,022.40
12/26/2006	1	Interest	99070		65.04	.00	.00	6,087.44
01/31/2007	1	Interest	99070		65.74	.00	.00	6,153.18
02/28/2007	1	Interest	99070		66.45	.00	.00	6,219.63
03/31/2007	1	Interest	99070		67.17	.00	.00	6,286.80
04/30/2007	1	Interest	99070		67.90	.00	.00	6,354.70
05/29/2007	1	Interest	99070		68.63	.00	.00	6,423.33
06/30/2007	1	Interest	99070		69.37	.00	.00	6,492.70

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STATEMENT

Date: 03/27/2008

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10/31/2003

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Last Charge:

03/07/2008

Robert J Del Rosario P.o. Box 7394 Tamuning, GU 95931

Patient: Del Rosarlo, Robert J

Case Type: MVAGG

Account No: 9460-1

Date	Dr	Description	Code	Modifier	Charge	Credit	Adjust	Balance
07/31/2007	1	Interest	99070		70.12	.00	.00	6,562.82
08/30/2007	1	Interest	99070		70.88	.00	.00.	6,633.70
09/30/2007	1	Interest	99070		71.64	.00	.00	6,705.34
10/31/2007	1	Interest	99070		72.42	.00	.00	6,777.76
11/30/2007	1	Interest	99070		73.20	.00	.00	6,850,96
01/18/2008	1	Interest (Dec. 2007)	99070		73.99	.00	.00	6,924.95
02/05/2008	1	Interest (January 2008)	99070		74.79	.00	.00	6,999.74
03/07/2008	1	Interest (Feb. 2008)	99070		75.60	.öö	.00	7,075.34

TOTALS:

7,577.34

502.00

.00

MESSAGE:

For proper credit, please enclose this portion with your payment.

Robert J Del Rosarlo P.o. Box 7394

Tamuning, GU 96931

Statement Date:

03/27/2008

Account No:

9460-1

Balance:

\$7,075.34

Pay This Amount:

\$.00

Amount Enclosed:

Please fill in amount.

Gregory J. Miller, D.C. 2078 Ste C Rte 16

Dededo, GU 96929

Date Due:

On Receipt

Thank you.

### STATEMENT OF PAYMENT AGREEMENT

Chiropractic Clinic ("Clinic") the balance due on this account from the date of the first treatment to the date of the last treatment for services and /or supplies rendered. I agreed to pay the Clinic the total sum on my account with interest rate at the rate of 18% per annum of 1-1/2% per month on any unpaid balance outstanding after 30 days from the date of the last treatment. I further promise to use my efforts to discharge this indebtness as expeditiously as possible.

Should I default in any way to keep payments current on this indebtness, I Agree that this statement may be used as an admission of liability in any suit that may be filed in order to collect the monies owed to the clinic.

In the event it is necessary to refer this matter to an attorney for collection, or judicial or non-judicial proceedings are instituted to collect any amount on this agreement, the undersigned agrees to pay to the clinic in addition to the unpaid balance of principal and interest, all costs and expenses of such proceedings, including reasonable attorney's fees.

In the event of any default in payment of any installment due, and if such default remains uncured five (5) days after written notice is given, then the full balance of the unpaid principal with unpaid interest may be declared immediately due and payable.

A photographic or electronic copy of this agreement shall be considered as effective and valid as the original.

Date: APR 1 7 2003

TOBERT DEL ROSARIO

print name

X P. O. BOX 7394

mailing address

X 7AM. GUBH 96981

city state zip

Signature

Marianas Chiropractic Clinic Dr. Gregory J. Miller 2078 C Route 16 Harmon, GU 96912

## Marianas Chiropractic Clinic DR. GREGORY J. MILLER

2078 Route 16, Suite C Harmon, Guam 96912 Telephone: (671) 637-7926/6683 Fax: (671) 637-8887 Email: gmdc@netpel.com Robert pel Rosario



# RE: CHIROPRACTIC REPORTS AND DOCTOR'S LIEN

I do authorize Dr. Gregory J. Miller, D.C. to furnish you my attorney, with a full report of his examination, diagnosis, treatment, prognosis, etc. of myself in regard to the accident in which I was involved.

I authorize you, my attorney, to pay directly to Dr. Miller such sums as maybe due and owing him for chiropractic service rendered me both by reason of this accident and by reason of any other bills that are due his office and to withhold such sums from any settlements, judgment or verdict which maybe pain to you, my attorney, or myself as the result of the injuries for which I have been treated or injuries in connection with the accident.

I give Dr. Miller a lie (a priority claim) on the proceeds from any such settlement judgment or verdict to the extent of his chiropractic fees for his treatment of the injuries I sustained as a result of this accident.

I fully understand that I am directly and fully responsible to Dr. Miller for all chiropractic bills submitted by him for service rendered me and that this agreement is made solely for Dr. Miller additional protection and in consideration for his awaiting payment. I further understand that such payment is not contingent on any settlement, judgment or verdict by which I may eventually recover these chiropractic fees.

The undersigned being attorney of record for the above patient agrees to observe all the terms of the above and agrees to withhold such sums from any settlement, judgment or verdict as maybe necessary to adequately protect Dr. Gregory J. Miller

Date: 7/29/97

Please date, sign and return one copy to doctor's office. Keep one copy for your record.

A photographic or electronic copy of this agreement shall considered effective and valid the original.